• • • • • • • • • • • • • • • • • • •	CLAIMS AS FILED - (Column I)	PARTI	mo 2)	SMALL E	NITY .	^~	OTHER H	
OR	NUMBER FILED		NUMBER EXTRA		FEE.		RATE	FEE
BASIC FEE profit Lifed TOTAL CLAIMS						OR		s
(17 CFR LINES) MDEPENDENT CLAIMS (17 CFR LINES)		s). ·			·	OR OR	× \$	_
MULTIPLE DEPENDENT O	LAIM PRESENT 07	OFR 1.14(4)				OR -		
(Prince of Contract in column 1 is less	CLAIMS AS AME	NDED - PART II		TOTAL	ипту -	פרו	TOTAL   OTHER TI SMALL E	
CL. REM.	ALMS ALMING TER DMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (17 CTR LINE) Independent (17 CTR LINE)	5 Minus	18	- /	z Ś=		OR ,	· S	
•	3 Minus	<u>"3</u>	=/			ÖR 2		-
	ON OF MULTIPLE DEP	(Column 2)	وليفاد ا الاتكان (Calama 3)	TOTAL ADDIT, FEE		OR:	TOTAL	
CL. REM.	AIMS AINING TER DMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	•	RATE	ADDI: . · TIONAL FEE .
Total grown independent or ora 1.1600	Missus	" 18 db	-8	)s		OR OR	x S <u>.     </u>	
~ 1	Mimus ON OF MULTIPLE DEP	(6)	D7 (578 1.1444)	*	•	OR OR	<u>*</u> -	
7/14/05	eron 1)	(Column 2)	(Calumn 3)	TOTAL ADDIT. FEE		OR	TOTAL DIT. FEE	
REM. AF	AIMS AINING TER IDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total current	Minus	-23	=	× 5	* 7	OR:		/

"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 70, enter "7".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 70, enter "7".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate but in column 1.

Burden Hour Sestement: This form is estimated to take 0.2 hours to complete. There will very depending when the mech of the individual case. Any comments on the annear of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Tendround Office, Washington, D.C. 20731. (IN) NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissionary for Patents, Washington, INC 20231.

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